								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003								10/713,943					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TO	TAL CLAIMS	20						RATE F		7	RATE	FEE	
FOR			NUMBER FILED		NUME	SER EXTRA	BASIC	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			26 minus 20=		.6			X\$ 9= = 1L		OR	X\$18=		
IND	EPENDENT C	LAIMS	ス minus 3 =		* 10		X43=		54		X86=		
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT							OR			
* If the difference in column 1 is less than zero, enter "0" in column 2							+14	_		OR	+290=		
								AL	584	OR	TOTAL	71100	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	LL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	EST BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MQZ	Total	. 21	Minus	"2,	_	= 0	XG	Ĭ	V	Θ'n	X\$18=		
AME	Independent	. 3	Minus	*** 5		= 🔾	X43	=		OR	X86=	/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>	•	OR	+290=		
								TAL		ייין	TOTAL	·	
(Column 1) (Column 2) (Column 3)								EE			ADDIT. FEE		
		CLAIMS	<u> </u>	. HIGH	ST			_	ADDI-	l f	1	ADDI-	
ENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RAT	E	TIONAL		RATE	TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=	X\$ 9	_]		OR	X\$18=		
ME	ind pendent	*	Minus	***		=	X43:	_		OR	X86≈		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	_			+290=		
								= IAL		OR	+290= TOTAL		
								EE		OR ,	ADDIT. FEE		
		(Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE	l	RATE	ADDI- TIONAL FEE	
NON I	Total	*	Minus	**		= .	X\$ 9	- [OR	X\$18=		
A ME	Independent	*	Minus	***		= .	X43=			OR	X86=		
Ţ	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		+145:	+		Ì			
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								-	OR	+290= TOTAL		
on If	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										DDIT. FEE		
T	he "Highest Num	ber Previously Paid	For (Total or	Independer	nt) is the	highest number fo	ound in the	арр	ropriate box	iņ colu	ımn 1.		